Lecture Banking - Quality Learning Transfusions for Health Sciences Students Post-COVID-19

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ABSTRACT

The Coronavirus has changed the dynamics of human interaction around the globe. Medical Education in Pakistan is moving through a state of transition with introduction of the modular education in place of traditional methodologies. The development of Lecture bank can be the source of helpful educational transfusions for student centered self-directed learning in health professional education.

KEYWORDS: Lecture banking, Education, COVID-19, Health sciences.

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The COVID-19 pandemic emerging from a small market in one corner of the world has affected approximately 4.5 million people as of May 17, 2020.¹ The virus that spreads through mere breathing and stays asymptomatic in most of the individuals has changed the dynamics of human interaction around the globe. The new norm is staying physically distant a meter or two from other members of the species in order to be able to keep breathing normally.²

This physical distancing paradigm has not only affected how humans celebrate happiness but has also shaken the core of physical classroom education. Education of the health professions is no different.³ All the medical and dental colleges of the country cannot host students as coming to the campus endangers lives. With class strengths ranging from hundred to three hundred, the mainstav of classroom teaching in the undergraduate health sciences education are the lectures delivered face to face.⁴

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Therefore, the dilemma for the colleges and universities post COVID-19 is the loss in terms of time as education must go on and learning should not stop, however the students just cannot be made to come to the Lecture Halls!

But is it really a dilemma in the 21st century, in the age of technological advancements? Is physical presence of faculty and students mandatory in a confined space of a building for delivering lectures? The answer is negative and has been so for quite some time now as asynchronous form of online lecturing is available since the advent of the internet and introduction of video hosting platforms. As for the synchronous online lectures most of the work done in Pakistan has been in Continuing Professional Development activities like webinars hosted by the educational wings of pharmaceutical companies, with a very few webinars for undergraduate medical students as part of certain conferences and seminars.

The technology, thus, is available but is it reported to be effective when used for delivering lectures in terms of learning achieved? To the relief of the educator the answer is not only a yes but

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literature has also reported readiness of students with high student satisfaction and good grades with this intervention.^{5,6} In author's opinion, a welldesigned online lecture with inbuilt interactive features might be a much more effective learning tool than physical lecturing with a class size of upto three hundred students where most of them are not even visible to the teachers.

Ensuring education even in the difficult times, most of the health sciences institutions have implemented the educational emergency and have started online lecture delivery by the faculty. But, are the front liners, faculty in this case, who are geared towards delivering lectures physically in the classroom, also as good in designing and delivering lectures online? Most would argue that that medium of delivery does not matter but the expert in instructional design highlight clear difference between designing instruction in a physical classroom versus a virtual classroom or video lecturing especially when interaction is desired to enhance knowledge transfer and retention. The educators need to be well versed both in terms of learning the necessary IT skills and also with rules of e-interaction and mastering the art of student engagement especially when teaching through recorded lecture videos. Literature reports inadequate use of multimedia design principles in the delivery of lectures spanning the domain of basic science, clinical medicine, and skills education.7

Medical Education in Pakistan is moving through a state of transition with introduction of the modular education in place of traditional methodologies. Even before the pandemic the dearth of properly human resourced medical education departments and the lack of trained faculty in terms of student centered learning has been a matter of concern which is more so now with the need to employ online tools for student engagement thus giving more control to the students regarding their learning.⁸ Keeping this in mind the concern is that the online lectures that are delivered across colleges might not be meeting the standards of quality of online student engagement and may lead to compromised learning for these students. This is of prime importance for the larger universities looking after many affiliated institutions with diverse student body and faculty

members not only in terms of numbers but also in terms of faculty skill set as regards to instructional design and technology management.

For the long-term special emphasis will have to be given to faculty development in this area but as of today in the wake of COVID-19 pandemic this problem can be converted into an opportunity through collaboration between faculties across institutions. A physical get together can be replaced by an e-get together. The tech savvy faculty members can be linked with the instructional designers and traditional classroom lecture givers to develop effective online lectures in their specialties across the boundaries of the institutions. The lectures once developed can be stored at a central bank for current and later use.

A single lecture developed to be delivered by multiple subject specialists to students enrolled in all the colleges, will not only ensure high quality but also the necessary standardization of medical education in the institutions affiliated with a single university as is the case in Pakistan. The pool of quality online lectures can be made available to enrolled students so that they can learn at their own pace and at their convenient time. This "Lecture bank" once developed can be the source of perfect educational transfusions for student centered self-directed learning in health professions education in the post COVID-19 world.

CONFLICT OF INTEREST

None to declare.

FINANCIAL DISCLOSURE

None to disclose.

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